

KREWE OF MUSES

2008-2009 MEMBERSHIP APPLICATION

NON- RIDING MEMBERS

Please complete this form and mail to Krewe of Muses, 5500 Prytania Street #621, New Orleans, LA 70115
or fax to (504) 737-4002.

Please print:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home No. _____ Work No. _____

Cell No. _____ Fax No. _____

Email: (most communication is by email) _____

Company Name/Occupation: (optional for listing in directory): _____

Do you want to be on the waiting list to ride in 2009 if space becomes available? Yes___ No___

PAYMENT: Total - \$150.00

Method: **VISA**___ **MasterCard**___ **American Express**___ **Check**___ (payable to Goddesses, Inc.)

Please print clearly:

Card Number _____ Exp. Date _____

Name on Card _____ Signature _____

PLEASE NOTE Once paid, dues and fees are non-refundable.

There will be a \$50.00 fee for all NSF checks.

We have a long wait list for riding membership.
We will contact you as soon as space is available.